GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

STARRED QUESTION NO:70
ANSWERED ON:22.10.2008
RISE IN MALARIA DENGUE AND CHIKUNGUNYA CASES
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the World Health Organisation (WHO) has predicted a steep rise in Malaria and Dengue cases in the country;

(b) if so, the details thereof and the reasons therefor;

(c) whether cases of Dengue, Chikungunya and Malaria have surfaced recently in the country including Maharashtra, West Bengal and Delhi;

(d) if so, the details thereof and the reasons therefor;

(e) the number of cases reported and the number of persons died from these diseases during the last three years and the current year, State-wise disease-wise; and

(f) the effective measures taken/being taken by the Government to eradicate these diseases?

Answer

THE MINISTER OF HEALTH & FAMILY WELFARE (DR. ANBUMANI RAMADOSS)

(a)to(f): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 70 FOR 22ND OCTOBER, 2008

(a) & (b): No, Sir. WHO has not prepared any report containing predictions concerning malaria and dengue cases in the country.

(c) to (f): The cases of Dengue, Chikungunya and Malaria have not surfaced recently in the country. Instead, the country including the States of Maharashtra, West Bengal and Delhi have been fighting against these diseases for a long time.

The first outbreak of dengue was reported in 1956 from Vellore district in Tamil Nadu. Currently, it is being reported from 18 States and 4 Union Territories of the country including the States of Maharashtra, West Bengal and Delhi.

Chikungunya was first reported in the country during the last millennium in the years 1963 in Kolkata, 1965 in Pondicherry and Chennai in Tamil Nadu, Rajahmundry, Vishakapatnam and Kakinada in Andhra Pradesh; Sagar in Madhya Pradesh; and Nagpur in Maharashtra and 1973 in Barsi in Maharashtra. Thereafter, no cases were reported for 3 decades but it has re-emerged in the country in 2006 and affected 16 States including Maharashtra, West Bengal and Delhi.

Dengue and chikungunya are outbreak prone viral diseases transmitted by same vector viz. Aedes aegypti mosquitoes. Aedes aegypti mosquitoe prefers to breed in man made containers in which water stagnates for more than a week. The occurrence of these diseases has shown an increase in recent years due to rapid urbanization, life style changes and deficient water management including improper water storage practices leading to increase in vector mosquito breeding sites. Besides, improved global travel has also increased the chances of entering or re- entering of the viruses in the country from the endemic countries.

Malaria is endemic in the country including the States of Maharashtra, West Bengal and Delhi. As per the reports received from the States/UTs, Malaria cases in the country and the States of West Bengal and Delhi shows overall decline. However, slight increase in cases is reported from the State of Maharashtra compared to the corresponding period (January − September) of previous year as indicated in the table below:

Country/State	Year (Jan - Sept)	Malaria Cases
Country Total	2007	653827
	2008	599906
Maharashtra	2007	36149
	2008	39348

West Bengal 2007 43796
2008 25476
Delhi 2007 120
2008 59

The state-wise and disease-wise number of cases reported and the number of persons died from Dengue, Chikungunya and Malaria during the last three years and the current year, are given in Annexure-I, Annexure-II and Annexure-III respectively.

For prevention and control of Dengue and Chikungunya in the country, Government of India has already formulated a specific disease control programme. Further, a strategic Action Plan for implementation of programme strategies has been developed and sent to the States on 27-01-07 for implementation. The following are the activities under this programme:

1. For strengthening monitoring and surveillance, Sentinel Surveillance Centres have been set up in 137 different existing hospitals spread over 20 States and Union Territories. Apart from these Sentinel Surveillance Centres, 13 labs have been identified as Apex Referral Labs spread out in existing hospitals in different parts of the country for the confirmation of Dengue.

2. For Dengue testing, dengue testing kits (IgM MAC Elisa kits made by National Institute of Virology, Pune) are being supplied to the Sentinel Surveillance Hospitals and Apex Referral Labs. These Centres are also being funded to some extent by Government of India.

3. States are being funded for procurement of fogging machines.

4. Capacity building through training is being done.

5. Need based operational research is being conducted.

6. Epidemic preparedness, Monitoring and Evaluation, and IEC for awareness generation of the community, are other important activities undertaken in this programme.

Separate budget has been allocated for Dengue and Chikungunya in the 11th Five Year Plan for this purpose. During 2007-08, an amount of Rs. 2.50 crores was sanctioned which has been increased to Rs. 16.69 crores in 2008-09. In addition, amounts of Rs.21.60 crores and Rs.8.75 crores were released during 2006-07 and 2007-08 respectively to the Chikungunya affected States as emergency packages.

In respect of Malaria, the Government of India provides technical assistance and logistics support including anti malaria drugs, insecticides, larvicides, Rapid Diagnostic Kits etc under the National Vector Borne Disease Control Programme. For control of Malaria, following strategies are being implemented through States/UTs:

i. Disease Management

Early case detection and complete treatment.

Strengthening of referral services

Epidemic preparedness and rapid response

ii. Integrated Vector Management for reducing mosquitoes density

Indoor Residual Spraying in selected high risk areas

Use of Insecticide treated bed nets

Use of Larvivorous fishes.

Anti-larval measures in urban areas including bio larvicides

Minor environmental engineering

iii. Supporting Interventions:

Behavior Change Communication

Public Private Partnership & Inter-sectoral convergence

Human Resource Development through capacity building